

#### **IV. POPULATIONS WITH SPECIAL NEEDS - OTHER THAN HOMELESS**

##### **A. ELDERLY AND FRAIL ELDERLY - CURRENT NEEDS**

###### **1. Population**

Utah's elderly and frail elderly population is growing, both in terms of numbers and as a proportion of the population. According to the 1990 census, 202,338 persons in the State are over 60 years of age, or 11.74% of the total population; 67,037 persons, or 3.89% of the total population is over 75 years of age. A high percentage of the over 75 population are female. This segment is increasing in number because of medical advances and also in the ability of this group to take care of themselves in their own homes. This special group will require additional housing and additional support services. Their needs vary from county to county throughout the State.

COUNTY	TOTAL POPULATION	OVER 60	PERCENT	OVER 75	PERCENT	PERCENT STATE
Salt Lake	725,956	82,957	11.43%	25,336	3.49%	4.82%
Davis	187,911	16,714	8.89%	4,021	2.14%	0.97%
Morgan	5,528	628	11.36%	195	3.53%	0.04%
Weber	158,330	23,472	14.82%	7,145	4.51%	1.36%
Tooele	26,601	3,275	12.31%	816	3.07%	0.19%
Utah	263,590	24,759	9.39%	7,818	2.97%	1.44%
Wasatch	10,089	1,270	12.59%	418	4.14%	0.07%
Summit	15,518	1,303	8.40%	366	2.36%	0.08%
Cache	70,183	7,362	10.49%	2,749	3.92%	0.43%
Rich	1,725	242	14.03%	85	4.93%	0.01%
Box Elder	36,485	4,817	13.20%	1,555	4.26%	0.28%
Duchesne	12,645	1,455	11.51%	441	3.49%	0.08%
Uintah	22,211	2,456	11.06%	650	2.93%	0.14%
Daggett	690	103	14.93%	36	5.22%	0.01%
Carbon	20,228	3,504	17.32%	2,700	13.35%	0.20%
Emery	10,332	1,119	10.83%	808	7.82%	0.06%
Grand	6,620	1,071	16.18%	282	4.26%	0.06%
San Juan	12,621	1,280	10.14%	384	3.04%	0.07%
Juab	5,817	1,066	18.33%	387	6.65%	0.06%
Millard	11,333	1,773	15.64%	983	8.67%	0.10%
Piute	1,277	335	26.23%	176	13.78%	0.02%
Sanpete	16,259	2,737	16.83%	1,009	6.21%	0.16%
Sevier	15,431	2,763	17.91%	946	6.13%	0.16%
Wayne	2,177	426	19.57%	144	6.61%	0.02%
Beaver	4,765	1,005	21.09%	340	7.14%	0.06%
Garfield	3,980	771	19.37%	211	5.30%	0.04%
Iron	20,789	2,667	12.83%	1,340	6.45%	0.15%
Kane	5,169	966	18.69%	275	5.32%	0.06%
Washington	48,560	10,042	20.68%	5,421	11.16%	0.58%
TOTAL STATE	1,722,820	202,338	11.74%	67,037	3.89%	11.74%

The following is a list of current Nursing Care Facilities throughout the State of Utah.

AME	ADMINISTRATOR	TOTAL BEDS	SNF*	ICF**	ICF/MR+	CERTIFIED++
A & E Nursing Home 3094 S State Street Salt Lake City, UT 84115	Trudy Scharma (801) 487-7837	37	0	37	0	YES
Alpine Valley Care Center 25 E Alpine Drive Pleasant Grove, UT 84062	Richard Shumway (801) 785-3568	52	52		0	YES
Alta Care Center 4035 S 500 E Salt Lake City, UT 84107	Durk Anjewierden IV (801) 262-9181	99	99	0	0	YES
American Fork Hospital, Transitional Care 170 N 1100 E American Fork UT 84003	Susan T. Fleming (801) 763-3533	12	012	0	0	YES
Ann's Rest Home, Inc. 3944 S 400 E Salt Lake City, UT 84107	Ann Roos (801) 266-4339	30	0	30	0	YES
Ann's Siesta Villa 469 N Main Springville, UT 84663	Sharon Maestas (801) 489-9408	44	0	44	0	YES
Aspen Care Center 2325 Madison Avenue Ogden, UT 84401	Robert H. Breinholt (801) 399-5846	72	36	36	0	YES
Bountiful Care Center 130 E 100 N Bountiful, UT 84010	Rachel Stowell (801) 296-3003	23	0	23	0	NO
Box Elder County Nursing Home 460 W 600 N Tremonton, UT 84337	Robert F. Jex (801) 257-5356	38	0	38	0	YES
Bungalow Cara Center 645 S 1300 E Salt Lake City, UT 84102	Joyce Halling (801) 582-1457	26	0	0	26	YES
Canyon Hills Health Care Center 1100 N 400 E Nephi, UT 84648	John Cecil Bragg (801) 623-1721	80	80	0	0	YES
Castle Country Care Center 1340 E 300 N Price, UT 84501	Kathy Lee Paddock (801) 637-9213	100	26	74	0	YES
Castleview Hospital Transitional Care Center 300 N Hospital Drive Price, UT 84501	Elaine W. Mortenson (801) 637-4800	10	10			YES
Cedar Care Center 679 S Sunset Drive Cedar City, UT 84720	Robert Montgomery (801) 586-6481	44	0	44	0	YES
Clearfield Nursing & Rehabilitation Ctr 1459 S 1500 E Clearfield, UT 84015	Terry Parker (801) 773-6553	112	112	0	0	YES
Color Country Care Center 233 S 1000 E St. George UT 84770	Alice S. Barlow (801) 673-4310	25	0	25	0	YES
Country Meadow Convalescent Center	Carl W. Barney	155	30	125	0	YES

AME	ADMINISTRATOR	TOTAL BEDS	SNF*	ICF**	ICF/MR+	CERTIFIED++
5865 Wasatch Drive Ogden, UT 84403	(801) 479-8480					
Country View Manor 2901 W Center Street Provo, UT 84601	J. James Rutter (801) 373-5079	51	51	0	0	YES
Crestview Care Center 1053 W 1020 S Provo, UT 84601	Marcia N. Lindelien (801) 373-2630	99	99	0	0	YES
Crestwood Care Center 3665 Brinker Avenue Ogden, UT 84403	Elaine Coles (801) 627-2532	88	50	38	0	YES
Crossland Health Care Center 575 E 11000 S Sandy, UT 84070	Kathy D. Siskin (801) 571-7600	120	120	0	0	YES
Davis Hospital & Medical Center, Skilled Nursing 1600 W Antelope Drive Layton, UT 84041	Shannon Walker, RN (801) 825-9561	10	10			YES
Doxey Hatch Long Term Care Center 1255 E 3900 S Salt Lake City, UT 84124	Bradley Jan Mikesell (801) 262-3401	168	30	138	0	YES
Draper Rehabilitation & Care Center 12702 S 950 E Draper, UT 84020	Chamberlin W. Neff (801) 571-2704	93	93	0		YES
East Lake Care Center 1001 N 500 W Provo, UT 84601	Kory Coleman (801) 377-9661	120	120	0	0	YES
Eastridge Care Center 2730 E 3300 S Salt Lake City, UT 84109	Pat Johnson (801) 377-9661	113	52	61	0	YES
El Rancho Nursing Home East Highway 91, Box 860 Payton, UT 84651	Steve Lassen (801) 465-9211	51	51		0	YES
Emery County Nursing Home 455 W Mill Road Ferron, UT 84523	Todd Winder (801) 384-2301	50	50	0	0	YES
Fairview Care Center/East 455 S 900 E Salt Lake City, UT 84102	Joseph D. Petersen (801) 355-6891	36	0	36	0	YES
Fairview Care Center/West 876 W 700 S Salt Lake City, UT 84104	Sallie A. Maroney (801) 355-9649	36	0	36	0	YES
Fay Case Nursing home 294 E Morris Ave Salt Lake City, UT 84115	Judy B. Heaps (801) 466-2211	69	0	69	0	YES
Four Corners Regional Care Center 930 N 400 W (39-3) Blanding, UT 84511	Rayburn E. Jack (801) 678-2251	104	104	0	0	YES
Godfrey's Foothill Retreat, Inc.	Michael J. Godfrey, Sr.	50	50	0	0	YES

AME	ADMINISTRATOR	TOTAL BEDS	SNF*	ICF**	ICF/MR+	CERTIFIED++
775 N 200 E Brigham City, UT 84302	(801) 723-6038					
Hales Rest Home 46 N 100 E Spanish Fork, UT 84660	Steven A. Bona (801) 798-6220	28	0	28	0	YES
Hazen Nursing Home 2520 S Redwood Road West Valley City, UT 84119	Romaine P. Tuft (801) 972-1050	26	0	26	0	NO
Heritage Bennion Care Center 6246 S Redwood Road Salt Lake City, UT 84123	Mark F. Dunn (801) 969-1420	104	52	52	0	YES
Heritage Convalescent Center 350 E 300 N American Fork, UT 84003	Shirley Garrett (801) 756-5293	74	74	0	0	YES
Heritage Park Care Center 2700 W 5600 S Roy, UT 84067	Brent Jones (801) 825-9731	144	144	0	0	YES
Hidden Hollow Care Center 261 W 2000 S Orem, UT 84058	Kenneth F. Ekong (801) 225-2145	35	0	0	35	YES
Highland Care Center 4285 Highland Drive Salt Lake City, UT 84124	Barbara Adams (801) 278-2839	60	60	0	0	YES
Highland Cove Health Center 3750 S Highland Drive, Wing B Salt Lake City, UT 84106	Kimberly Dansie (801) 277-1900	34	0	34	0	NO
Hillcrest Care Center 348 E 8000 S Sandy, UT 84070	Peter Birkholz (801) 566-4191	60	0	0	60	YES
Hillhaven: A Health & Rehabilitation Center 41 S 900 E Salt Lake City, UT 84102	Inge Glover (801) 532-3539	154	154	0	0	YES
Hillside Villa Care Center 1216 E 1300 S Salt Lake City, UT 84105	Kelly Snowball (801) 487-5865	120	120		0	YES
Holladay Healthcare Center 4782 S Holladay Blvd Salt Lake City, UT 84117	Kathy Kurn (801) 277-7002	120	120	0	0	YES
Iron County Rest Home 69 E 100 S Parowan, UT 84761	Clarence J. Benson (801) 477-3615	31	0	31	0	YES
Ivy Manor Nursing Home 340 N 100 W Bountiful, UT 84010	Rachelle R. Stowell (801) 295-8112	24		24		NO
Johanna Nursing Home, Inc. 433 E 2700 S Salt Lake City, UT 84115	Johanna M. Syme (801) 487-2248	41	0	41	0	YES
LDS Hospital Transitional Care Center 8th Avenue & C Street	Sandra L. McNicoll (801) 321-5440	32	32	0	0	YES

AME	ADMINISTRATOR	TOTAL BEDS	SNF*	ICF**	ICF/MR+	CERTIFIED++
Salt Lake City, UT 84143						
Lakeview Hospital TCU 630 E Medical Drive Bountiful, UT 84010	Rebecca H. Fielden (801) 292-6231	10	10			YES
Larsen's Nursing Home 651 E 200 S Lehi, UT 84043	Maxine H. Larsen (801) 768-3502	30	0	30	0	YES
Life Care Center of Bountiful 460 W 2600 S Bountiful, UT 84010	Jerry Vaculin (801) 295-3135	120	120	0	0	YES
Lindon Care & Training Center 680 N State Street Lindon, UT 84042	Catherine Ann Richins (801) 785-2179	66	0	0	66	YES
Logan Nursing & Rehabilitation Center 1480 N 400 E Logan, UT 84321	Dan O. Heiner (801) 750-5501	97	97	0	0	YES
Logan Regional Hospital, Transitional Care Unit 1400 N 500 E Logan, UT 84321	Neil C. Perkes (801) 750-5444	16	16	0	0	YES
London Springs Care Center 160 W 500 N Heber City, UT 84032	John Barna (801) 654-5500	49	0	49	0	YES
Manor Care of South Ogden 5540 S 1050 E South Ogden, UT 84405	George Wright (801) 392-3195	120	120		0	YES
Mayfield Manor 11 S Main Mayfield, UT 84643	Eugene S. Bartholomew (801) 528-3550	37	0	37	0	YES
McKay-Dee Transitional Care Center 3939 Harrison Blvd Ogden, UT 84409	Michael Tippets (801) 625-2380	31	31	0	0	YES
Medallion Manor 1701 W 600 S Provo, UT 84601	Dennis R. Wright (801) 375-2710	40	0	0	40	YES
Mesa Vista 394 W 400 N Orem, UT 84057	Karren Allred (801) 225-9292	54			54	YES
Midtown Manor Care Center 125 S 900 W Salt Lake City, UT 84104	John N. Pappadakis (801) 363-6340	82	82	0	0	YES
Millcreek Health Center 3520 S Highland Drive Salt Lake City, UT 84106	Michael J. Daskalas (801) 484-7638	61	0	61	0	YES
Mt. Ogden Nursing & Rehabilitation 375 E 5350 S Washington Terrace, UT 84405	Raymond M. Wilde (801) 479-5700	108	108	0	0	YES
Murray Care Center 835 E Vine Street Murray, UT 84107	Patricia J. Richardson (801) 266-3852	76	76	0	0	YES

AME	ADMINISTRATOR	TOTAL BEDS	SNF*	ICF**	ICF/MR+	CERTIFIED++
Ogden Care Center North 524 E 800 N Ogden, UT 84404	Dawn L. Mullenax (801) 782-3740	104	104	0	0	YES
Olympus Care Center 950 E 3300 S Salt Lake City, UT 84106	Reuel McPhie (801) 486-5121	72	0	72	0	YES
Orchard Park Care Center 740 N 300 E Orem, UT 84057	Nadeene L. Anderson (801) 224-0921	89	89	0	0	YES
Orem Nursing & Rehabilitation Center 575 E 1400 S Orem, UT 84058	Gary Burraston (801) 225-4741	120	120	0	0	YES
Park View Nursing Home 523 N Main Street, P O Box 520 Bountiful, UT 84011	Dean Bithell (801) 298-2234	81	12	69	0	YES
Parkdale Care Center 250 E 600 N Price, UT 84501	Tracy M. Thurgood (801) 637-2621	58	58	0	0	YES
Pioneer Care Center 815 S 200 W Brigham City, UT 84302	Margo S. Eberhard (801) 723-5289	72	32	40	0	YES
Pioneer Valley Transitional Care Center 3460 S Pioneer Parkway West Valley City, UT 84120	Patricia A. Lamuth (801) 964-3100	11	11			YES
Porter's Nursing Home 126 W 200 N St. George, UT 84770	John W. Bramall (801) 628-1601	53	0	53	0	YES
Provo Care Center 256 E Center Street Provo, UT 84601	David Halling (801) 373-8771	35	0	0	35	YES
Richfield Care Center 83 E 1100 N Richfield, UT 84701	Ronald L. Nielsen (801) 896-8211	98	98		0	YES
Rocky Mountain Care - Holladay, Inc. 4600 S Highland Drive Salt Lake City, UT 84117	John Burton (801) 272-4411	100	100			NO
Rocky Mountain Health Care - Bountiful 350 S 400 E Bountiful, UT 84117	Dee R. Bangerter (801) 298-2291	100	100	0	0	YES
Rosewood Terrace 158 N 600 W Salt Lake City, UT 84116	F. William Cobabe (801) 363-4222	79	79	0	0	YES
Salt Lake Nursing & Rehab 165 S 10th E Salt Lake City, UT 84102	Sandy Lancaster (801) 322-5521	108	108	0	0	YES
Sandy Regional Conv. & Rehab Center 50 E 9000 S Sandy, UT 84070	J. Ross Farrer (801) 561-9839	152	152	0	0	YES
South Davis Community Care Center	Gordon W. Bennett	07	107	0	0	YES

AME	ADMINISTRATOR	TOTAL BEDS	SNF*	ICF**	ICF/MR+	CERTIFIED++
401 S 400 E Bountiful, UT 84010	(801) 295-2361					
South Valley Health Center 3706 W 9000 S West Jordan, UT 84088	Robert Steggell (801) 569-2273	120	59	61	0	YES
Southern Hospitality Living Center 35 S 100 E St. George, UT 84770	Laurel Orteiz (801) 673-3682	34	0	34	0	YES
St. George Care Center 1032 E 100 s St. George, UT 84770	Carolyn Carter Stuercke (801) 628-0488	164	164	0	0	YES
St. Joseph Villa 475 Ramona Avenue Salt Lake City, UT 84115	G. Richard Erick (801) 487-7557	175	175	0	0	YES
Stewart Cedar Crest Care Center 187 W Lagoon Street Roosevelt, UT 84066	Donna Lee Stewart (801) 722-2497	51	18	33	0	YES
Sunset Retirement & Care Center 1530 S 500 W Provo, UT 84601	Nilda Brunce (801) 374-1468	70	0	70	0	YES
Sunshine Terrace 225 N 200 W Logan, UT 84321	Scott Theurer (801) 752-0411	172	96	76	0	YES
Todholm Care Center 321 E 800 S Springville, UT 84663	Margaret M. Boyack (801) 489-9461	60	60	0	0	YES
Tooele Valley Nursing Home 140 E 200 S Tooele, UT 84074	Beth W. Vowles (801) 882-6130	82	82	0	0	YES
Topham's Tiny Tots Care Center 247 N 100 E Orem, UT 84057	Lorraine Topham (801) 225-0323	50	0	0	50	YES
Transitional Care Unit at UVRMC 1034 N 500 W Provo, UT 84604	Ron Liston (801) 373-7850	14	14	0	0	YES
Uintah Care Center 510 S 500 W Vernal, UT 84078	Rossa Simmons (801) 789-8851	52	27	25	0	YES
Utah State Developmental Center 895 N 900 E American Fork, UT 84003	Karen Clarke (801) 763-4000	390	0	0	390	YES
Valley View Nursing & Rehab Center 4150 W 335 S West Valley City, UT 84120	Lee R. Bangerter (801) 968-9028	72	72		0	YES
Wasatch Care Center 3430 Harrison Blvd Ogden, UT 84403	Kathleen Lowery (801) 399-5609	69	69	0	0	YES
Wasatch Valley Rehabilitation 2200 E 3300 S	Rebecca E. Landau (801) 484-8802	118	118	0	0	YES

AME	ADMINISTRATOR	TOTAL BEDS	SNF*	ICF**	ICF/MR+	CERTIFIED++
Salt Lake City, UT 84109						
Washington Terrace Nursing Center 400 E 5350 S Ogden, UT 84405	Brent Weil (801) 479-9855	120	54	66	0	YES
West Jordan Care Center 3350 W 7800 S West Jordan, UT 84088	Jeanie Pettit (801) 566-0686	82	0	0	82	YES
West Millard Care Center 275 W 100 S Delta, UT 84624	James E. Beckstrand (801) 864-2944	36	0	36	0	YES
Western Rehabilitation Institute Subacute Pro 8074 S 1300 E Sandy, UT 84094	Richard O. Dunkley (801) 561-3400	36				YES
Wide Horizons Care Center 910 Monroe Blvd Ogden, UT 84404	Marcia Parisi (801) 399-5876	83	0	0	83	YES
Willow Wood Care Center 1205 E 7425 S Salt Lake City, UT 84117	Christian Yeates (801) 262-2908	86	38	48	0	YES
Woodland Park Care Center 3855 S 700 E Salt Lake City, UT 84106	Laura Anderson (801) 258-4766	100	100	0	0	YES
Zions Health Care Complex 416 N State 38-13 Hurricane, UT 84737	Pat Weaver (801) 635-9833	62	14	48	0	YES
Total Number of Facilities 106						
Total Beds/Units		8,038	5,083	1,998	921	
Skilled Nursing Facility ↓Intermediate Care Facility for Mentally Retarded		** Intermediate Care Facility ++ Medicare/Medicaid Certified				



The following is a list of current Hospitals throughout the State of Utah.

NAME	ADMINISTRATOR	TOTALBED S	SWING	JCAHO
Allen Memorial Hospital 719 W 400 N Moab, UT 84532	R. Kim Hardman (801) 259-7191	38	YES	
Alta View Hospital 9660 S 1330 E Sandy, UT 84094	Wes Thompson (801) 572-2600	70	NO	JCAHO
American Fork Hospital 170 N 1100 E American Fork, UT 84003	Craig M. Smedley (801) 763-3300	72	NO	JCAHO
Ashley Valley Medical Center 151 W 200 N Vernal, UT 84078	Ronald J. Perry (801) 789-3342	39	YES	
Bear River Valley Hospital 85 N 400 E Tremonton, UT 84337	Robert F. Jex (801) 257-7441	20	YES	
Beaver Valley Hospital 85 N 400 E Beaver, UT 84713	Craig Val Davidson (801) 438-2416	36	YES	
Brigham City Community Hospital 950 S 500 W Brigham City, UT 84302	Robert H. Parker, Jr. (801) 734-9471	56	NO	JCAHO
Castleview Hospital 300 N Hospital Drive Price, UT 84501	Alan Larson (801) 637-4800	74	NO	JCAHO
Central Valley Medical Center 549 N 400 E Nephi, UT 84648	Mark R. Stoddard (801) 623-1242	31	YES	
Cottonwood Hospital Medical Center 5770 S 300 E Murray, UT 84107	Douglas R. Fonnesbeck (801) 262-3461	213	NO	JCAHO
Davis Hospital & Medical Center 1600 W Antelope Drive Layton, UT 84041	Floyd D. Morgan (801) 825-9561	110	NO	JCAHO
Delta Community Medical Center 126 S White Sage Ave Delta, UT 84624	James Beckstrand (801) 864-5591	20	YES	
Dixie Regional Medical Center 544 S 400 E St. George, UT 84770	L. Steven Wilson (801) 634-4000	106	YES	JCAHO
Duchesne County hospital 250 W 300 N Roosevelt, UT 84066	John R. Jefferies (801) 722-4691	42	YES	
FHP Utah Hospital 2500 S State Street Salt Lake City, UT 84115	G. Kirk Olsen (801) 484-1056	125	NO	

NAME	ADMINISTRATOR	TOTALBED S	SWING	JCAHO
Fillmore Community Medical Center 674 S Highway 99 Fillmore, UT 84631	James E. Beckstrand (801) 743-5591	20	YES	
Garfield Memorial Hospital 200 N 400 E - Box 389 Panguitch, UT 84759	Wayne R. Ross (801) 676-8811	20	NO	
Gunnison Valley Hospital 54 E 100 N Gunnison, UT 84634	Mark R. Stoddard (801) 528-7246	21	YES	
HCA St. Marks Hospital 1200 E 3900 S Salt Lake City, UT 84124	Max Lauderdale (801) 268-7000	306	NO	JCAHO
Holy Cross Hospital 1050 E S Temple West Jordan, UT 84088	Robert Ladenburger (801) 350-4111	200	NO	JCAHO
Holy Cross Jordan Valley Hospital 3580 W 9000 S West Jordan, UT 84088	Mark J. Neff (801) 561-888	50	NO	JCAHO
Kane County Hospital 220 W 300 N Kanab, UT 84741	Michael N. Sinclair (801) 644-5811	33	YES	
LDS Hospital 8th Avenue & C Street Salt Lake City, UT 84143	Richard M. Cagen (801) 321-1100	520	NO	JCAHO
Lakeview Hospital 630 E Medical Drive Bountiful, UT 84010	Kay Matsumura (801) 292-6231	128	NO	JCAHO
Logan Regional Hospital 1400 N 500 E Logan, UT 84321	Richard J. Smith (801) 752-2050	148	NO	JCAHO
McKay-Dee Hospital 3939 Harrison Blvd Ogden, UT 84409	Thomas F. Hanrahan (801) 625-2800	428	NO	JCAHO
Milford Valley Memorial Hospital 451 N Main Milford, UT 84751	Les Whitney (801) 387-2411	34	YES	
Monument Valley Hospital 4 Rock Door Canyon Rd Monument Valley, UT 84536	Ray Carney (801) 727-3241	20	YES	
Mountain View Hospital 1000 E Highway 6 Payson, UT 84651	Don Larsen (801) 465-9201	118	NO	JCAHO
Orem Community Hospital 331 N 400 W Orem, UT 84057	Mark Dalley (801) 224-4080	20	NO	
Pioneer Valley Hospital 3460 S Pioneer Parkway West Valley City, UT 84120	Steven Bateman (801) 964-3100	139	NO	JCAHO

NAME	ADMINISTRATOR	TOTALBEDS	SWING	JCAHO
Primary Children's Medical Center 100 N Medical Drive Salt Lake City, UT 84113	Donald R. Poulter (801) 588-2000	232	NO	JCAHO
San Juan Hospital 364 W 100 N Monticello, UT 84535	Larry E. Putnam (801) 587-2116	36	YES	JCAHO
Sanpete Valley Hospital 1100 S Medical Drive Mt. Pleasant, U 84647	George Winn (801) 462-2441	20	YES	
Sevier Valley Hospital 1100 N Main Street Richfield, UT 84701	Gary E. Beck (801) 896-8271	42	NO	JCAHO
St. Benedict's Hospital 5475 S 500 E Ogden, UT 84405	Richard A. Dahlkampar (801) 479-2111	239	NO	JCAHO
Tooele Valley Regional Medical Center 211 S 100 E Tooele, UT 84074	Linda Neese (801) 882-1697	38	YES	
University of Utah Hospital 50 N Medical Drive Salt Lake City, UT 84132	Dale R. Gunnell (801) 581-2378	425	NO	JCAHO
Utah Valley Regional Medical Center 1034 N 500 W Provo, UT 84603	Larry Dursteler (801) 373-7850	395	NO	JCAHO
Valley View Medical Center 595 S 75 E Cedar City, UT 84720	Margaret Holm (801) 586-6587	48	YES	JCAHO
Wasatch County Hospital 55 S 500 E Heber City, UT 84032	Randall K. Probst (801) 654-2500	40	YES	
Total Facilities 41				
Total Beds 4,772				

NAME	ADMINISTRATOR	TOTAL BEDS	SWING	JCAHO
Benchmark Regional Hospital 592 W 1350 S Woods Cross, UT 84087	Richard Hurt (801) 298-2844	56	NO	JCAHO
Brightway Adolescent Hospital 115 W 1470 S St. George, UT 84770	Robert Lichfield (801) 673-0303	10	NO	
Charter Canyon Treatment Center 175 W 7200 S Midvale, UT 84047	R. Jay Bawden (801) 561-8181	62	NO	JCAHO
Olympus View Hospital 1430 E 4500 S Salt Lake City, UT 84117	Susan L. Kosta (801) 272-8000	102	NO	JCAHO
Rivendell of Utah 5899 W Rivendell Drive West Jordan, UT 84088	Dr. Peggy A. Pettit (801) 561-3377	80	NO	JCAHO
Utah State Hospital 1300 E Center Street Provo, UT 84606	Paul Thorpe (801) 373-4400	343	NO	JCAHO
Wasatch Canyons Hospital 5770 S 1500 W Salt Lake City, UT 84123	Irene P. Tolman (801) 262-6199	46	NO	JCAHO
Western Institute of Neuropsychiatry 501 Chipeta Way Salt Lake City, UT 84108	Ross Van Vranken (801) 583-2500	76	NO	JCAHO
Total Facilities 8				
Total Beds 775				

NAME	ADMINISTRATOR	TOTAL BEDS	SWING	JCAHO
Highland Ridge Hospital 4578 Highland Drive Salt Lake City, UT 84117	Robert H. Boswell (801) 272-9851	34	NO	JCAHO
Total Facilities 1				
Total Beds 34				
<b>CHRONIC DISEASE</b>				
Doxey-Hatch Medical Center 1255 E 3900 S Salt Lake City, UT 84124	Bradley Jan Mikesell (801) 262-3401	12	NO	
South Davis Community Hospital 401 S 400 E Bountiful, UT 84010	Gordon W. Bennett (801) 295-2361	39	NO	
Total Facilities 2				
Total Beds 51				
<b>PEDIATRIC</b>				
Shriners Hospital for Crippled Children Fairfax at Virginia Street Salt Lake City, UT 84103	Douglas P. Schweikhart (801) 532-5307	45	NO	JCAHO
Total Facilities 1				
Total Beds 45				
<b>REHABILITATION</b>				
Western Rehabilitation Institute 8074 S 1300 E Sandy, UT 84094	Philip Comer (801) 561-3400	50	NO	
Total Facilities 1				
Total Beds 50				
<b>ORTHOPEDIC</b>				
The Orthopedic Specialty Hospital 5848 S 300 E Salt Lake City, UT 84107	Douglas R. Fannesbeck (801) 269-2290	14	NO	
Total Facilities 1				
Total Beds 14				
Total Number of Facilities of all Categories 55				
Total Number of Beds for all Categories 5,741				

## 2. County Demographics

a. Carbon, Emery, Grand, and San Juan county studies have stated that in general their elderly population is adequately housed. Carbon County has the second highest over 75 population in the State. The total Carbon county population is 20,228, the over age 75 population is 2,700 persons, or 13.35%. They are well above the state average of over age 60 persons, 3,504 or 17.32%. All of the counties have public elderly housing. However, most senior citizens continue to reside in their own homes, which most generally are paid for.

b .Box Elder, Rich, and Cache counties have some elderly housing available. However, most of the residents of these three counties own their own homes and wish to stay in them. Their numbers are consistent with the State average, with Cache county being slightly lower.

c. In Duchesne, Uintah, and Daggett counties, a current needs assessment showed that "unsuitable housing" was ranked as third by the low-income elderly population. The majority of this population in these three counties own their own homes and wish to stay in them. Duchesne and Uintah counties are slightly below the state average in the over age 60 and over age 75 group while Daggett county is well above the state average. Daggett county has a total population of 690 people. 103 persons are over the age of 60, or 14.93% and 36 persons are over the age of 75, or 5.22%.

d. Summit, Wasatch, and Utah county studies state the real need is in the low-income elderly retirement community for rentals that are less than \$500.00 per month. Summit county has the lowest over age 60 group in the state. The total county population is 15,518 persons; 1303 are over the age of 60, or 8.40%. 366 are over the age of 75, or 2.36%, the second lowest in the state.

Summit county also has the highest per capita income in the state.

e. Beaver, Garfield, Iron, Kane, Washington, Juab, Millard, Piute, Sanpete, Sevier and Wayne county studies all state that the biggest general need of the elderly is the need for additional residential care facilities. These need to be in the way of nursing home beds, and more senior citizen low income housing units. Piute County has the highest population in the state of over age 60. The total county population is 1277 people with 335 over the age of 60, or 26.23%, and 176 over the age of 75, or 13.78%.

f. The Wasatch front includes Weber, Morgan, Davis, Tooele and Salt Lake counties. Their studies state that among the highest priorities of the elderly and frail elderly is to secure adequate housing and transportation. It should be noted that within these five counties, they are all below the state average for over age 75, and Weber is the only county of the five which is over the state average in the over 60 age category, 14.82%. Davis county has the third largest population in the state. However, they have the lowest over 75 age group, 2.14% and the second lowest over age 60 group with 8.89%. It should also be noted that the persons in these counties, with the exception of Morgan, all have public transportation and more support programs and self help programs available to them than anywhere else in the state. They also have better access to local rest homes.

g. In Salt Lake county, there are various degrees of need. In Salt Lake City, there seems to be adequate housing for the elderly and frail elderly, both in terms of cost and availability. However, in West Valley City and West Jordan, it is noted that more low-income housing needs to be developed for the elderly, either in the form of senior citizen housing centers, or transitional type housing.

### **3. Current Needs - Entire State of Utah**

Adopted 24 April 1992 in St. George, Utah, at the Annual Meeting of the Utah Chapter of the National Association of Housing and Redevelopment Officials (NAHRO) at a session titled, "Development of an Ethic for Homeless Providers." Throughout all of Utah, with the exception of Salt Lake, Utah, Weber and Davis counties, there is a need for more nursing home care for the frail elderly, and residential care facilities for the over 60 population. A major need of the elderly throughout the State is comfortable, reasonable housing designed and located to compensate for some of their physical, psychological and economic limitations. Just because there is an empty bed in Salt Lake, does not mean that a person living in St George will feel comfortable moving 250 miles away from their home. Often the only family they have live in St George, and it puts a burden on the extended family, as well as the frail elderly put in surroundings that are not familiar.

Everyone in rural Utah faces this situation, regardless of what part of the State they live in. The needs of the elderly range from the psychological sense of place, safety, comfort, familiar surroundings, i.e. stores, Doctors offices, public places, to those related to physical limitations, such as design features, i.e. elevators, ramps, an adequate heating system and maintenance of units, to landlord relations, tenant contracts and safety from strangers.

The declining functional capacity of the elderly means that safety and health features must be built into their home environment. This is a statewide problem, not just one area. New trends show that approximately 5% of those applying for assisted housing are elderly and this number will increase rapidly in the years ahead. Often the elderly are not associated with affordable housing issues, as they are thought to own their own homes and have incomes capable of handling their own repairs, insurance, taxes, etc. While this may be the case in some instances, the majority of the elderly do not have it so good. Most of them are on a fixed income, and cannot afford the substantial rehabilitation that is sometimes necessary to accommodate wheelchairs or walkers. The plumbing, electrical, roofs and appliances are often antiquated and in disrepair. Escalating taxes and insurance premiums add up. The elderly who own their own homes are faced with the problem of their homes falling in disrepair because of their limited physical and financial condition. This results in the repairs not being done and the home becoming unsafe.

Home accidents are a major cause of problems for the elderly. When an elderly person falls, they usually break a leg, hip, arm or shoulder. If they are not able to be up and around, they usually develop pneumonia. Many of them are forced into nursing homes, because they cannot return to their own homes where they would prefer to live, because the cost of refitting their homes to meet their needs is beyond their ability. Throughout the state, there is a need for housing units, where a person could stay for an extended period with supportive care available until they are able to return to their own homes. The problem with this situation is Medicare will not pay for convalescence care, but they will pay for in home nursing care.

Another need of the elderly throughout the state is for senior citizen housing units in the form of single family homes (including condos), low cost rental units, and retirement group quarters. Housing assistance is needed in many rural communities, especially in the southern half of the state where the percentage of the total county population of elderly is high.

One of the highest priority items throughout the state is for in home care service, followed by self programs, community involvement at senior citizen centers and chore service. In almost every rural community, the traditional family support for the elderly is not there and they rely more on public agencies for the help they need. Most of the younger families have had to move away because of the

economic condition of the counties. The ironic thing is, most of the elderly want their families to move back, but the local government authorities and local zoning ordinances will not change their views on low cost housing apartment type dwellings that are needed for this segment of the population. Most of the jobs that are available in rural areas are low paying, seasonal, and often do not have any "benefits" associated with them. Economic development in the form of new businesses that could provide new jobs, not just replace existing ones, is greatly needed, and then families would be able to live in these areas and provide the support that is missing. Everyone is in agreement that low cost apartment complexes are needed, but "don't build them next to my house" is the prevalent feeling. In order for these changes to occur, changes must take place in political will, public education, and public tolerance for apartments and subsidized housing. It is difficult for young families to return due to the cost of housing. Restrictive zoning prevents construction of new apartments. This is because of public opinion that says "we do not want to live near apartments". In some rural communities where some senior citizen housing has been built, it is out on the edge of town. There is not any public transportation available, and often sidewalks and curb and gutter are not installed, making it almost impossible for the senior citizen to get into town to take advantage of some of the existing programs that are available.

As an example, in 1993 the Uintah Basin Association Of Governments prepared a "Needs Assessment for Seniors and Seniors with Disabilities". This study projected "that the elderly population of the Uintah Basin will almost double within the next 20 years. The population over the age of 75 years of age will increase from 1,348 in 1990 to 2,317 by the year 2010. These facts indicate a dramatic increase in the number of persons who will require assistance with such services as home delivered meals, home health services, congregate meals, transportation, and day care, as well as housing and assisted living. While Duchesne and Uintah Counties each have excellent 50 bed skilled nursing care centers it is obvious that local officials must begin to make immediate plans if the needs of this growing population are to be met. In 1994 Beehive Homes opened a facility in the Maeser area of Uintah County. This is a facility which offers supervised care in a family setting for those who do not require full time skilled nursing care. ... The costs ...are considerably less than those at skilled nursing facilities. The officers of this corporation have indicated that they will open one or more similar homes of this type within the Basin as the need arises. Additionally, there are a few other privately owned facilities which assist in caring for the elderly scattered throughout the region. Even so there is still a lot of work to prepare for the needs of the future."

In most rural governments, there are no professional politicians. Except for the few elected officials retired from regular employment, all the commissioners, mayors, and city council members fulfill their civic duties while holding full time jobs or operating businesses. While the counties do employ maintenance crews, clerical support and in a few cases administrators and planners, these people are required for the actual operation of government and are not available to be involved in, nor gain knowledge of specific housing problems or look for solutions. Frequently there is no participation in private-public programs such as the Utah Housing Finance Agency, Rural Community Assistance Corporation, or the community investment organizations, etc., primarily because the resources to hire staff with the expertise to take advantage of these programs is unavailable. It is a waste of time and taxpayer's money to build a housing project or shelter or have a repair program when there is no funding to hire staff to operate, maintain, and coordinate these facilities and programs. There is no local money or resources available to fund these positions, federal insistence of local match, or that the funding only be used for "program" not "admin" results in many of these programs not being utilized at all in rural areas where they are the most needed.



An observation was made in the Mountainland CHAS. "As Agency personnel, public officials, and even the 'average citizen' are approached about housing needs in the region, there is an overwhelming sense that in Mountainland housing is a minor problem that someone else should address, especially the private sector." This seems to be true in all of Utah, and the problem is only looked at when someone is faced with the situation of finding elderly housing that is affordable, suitable and available in their area, or when they are forced to look at the problem by having some federal funds withheld.

## **B. SEVERELY MENTALLY ILL**

Most sources estimate that approximately 30 percent of the homeless are mentally ill, and all agree that mentally ill homeless are victimized by assault, more likely to be picked up by the police, and too often dismissed by the mental health system with the assertion their aberrant behavior makes them "non-compliant".

But recently progress has been made in promoting the idea that systems should be adapted to meet the needs of the mentally ill, and not the other way around.

Many observers point to the deinstitutionalization during the 1950's and '60's to explain the increase in the number of mentally ill homeless. In fact, in 1955 approximately 559,000 patients were in state hospitals in the United States. Today, that number has fallen to 114,000. In addition, according to the 1990 annual report by the Interagency Council on the Homeless, the number of days per "inpatient treatment episode dropped from 99 days in 1969 to 37 days in 1986; and outpatient, community-based care of the mentally ill increased from 379,000 episodes of outpatient care in 1955 to 5.6 million in 1986." Moreover, the number of beds in Utah's state hospital has fallen from 1,500 in the 1950's to slightly over 300 today. It is estimated that nearly 1.6 percent of all Utahns are either developmentally disabled or mentally ill.<sup>1</sup>

Deinstitutionalization alone does not account for the increase, but the way it was implemented may. Richards Lamb in a report entitled, *Homelessness* wrote:

It is my feeling, however, that problems such as homelessness and criminalization of the mentally ill are not the result of deinstitutionalization per se but rather of the way deinstitutionalization has been implemented. A lack of understanding of the needs of the chronically mentally ill, plus the unplanned discharge of hundreds of thousands of mentally ill residents of state hospitals into inadequately prepared communities, added up to disaster.<sup>2</sup>

The problems facing homeless mentally ill individuals is very perceptively stated by Alan I. Leshner *et al.*, who wrote that "severely mentally ill individuals, in particular, cannot negotiate a service system in which health care, mental health and substance abuse treatment, social services and income support, legal services, housing, and rehabilitation and employment services are separate and uncoordinated. In addition to being comprehensive and integrated, the system of care we are promoting must be accessible to and easily maneuvered by its intended users."<sup>3</sup> The problem is compounded because "some people who are difficult to treat effectively are essentially dismissed by the treatment system."<sup>4</sup> This has been as true in Utah as in other places, with one mental health provider quoted as defending his agency's lack of commitment to the homeless mentally ill on the grounds that "these people are too sick for our system!"

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<sup>1</sup>Comprehensive Mental Health Plan of Services for the Seriously Mentally Ill, Blueprint For Action 1989-1991 (Utah State Mental Health Planning Committee, December 1988), p. 8.

<sup>2</sup>Richard Lamb, *Homelessness, Critical Issues for Policy and Practice* (The Boston Foundation, 1987), p. 33.

<sup>3</sup>Alan I. Leshner *et al.*, *Outcasts on Main Street: Report of the Federal Task Force on Homelessness and Severe Mental Illness* (Washington, D.C., Interagency Task Force on the Homeless, 1992), p. xi.

<sup>4</sup>Alan I. Leshner *et al.*, *Outcasts on Main Street: Report of the Federal Task Force on Homelessness and Severe Mental Illness* (Washington, D.C., Interagency Task Force on the Homeless, 1992), p. 9.

The most extensive research that concerning the mental health of Utah's homeless was done by the Task Force for Appropriate Treatment of the Homeless Mentally Ill in 1986. Volunteer interviewers were recruited from agencies serving the homeless or mentally ill and received training in interviewing.

Three indicators were used by the interviewers to determine the mental health of the person being interviewed. These include the DuPuy General Well Being Schedule, history of mental health treatment, and the interviewers' general impression. Quoting from the task force report:

The DuPuy General Well Being Scale is recognized as a valid and reliable instrument which measures emotional health/psychiatric impairment on six dimensions: energy level; relaxed vs. tenseness; degree of satisfaction with life; cheerful vs. depressed mood; emotional/behavioral control; freedom from worry.

Using the DuPuy General Well Being Scale, the task force reported that 38 percent of the respondents were judged to be severely distressed and an additional 19 percent scored moderately distressed. Only 43 percent were judged to be in the positive well-being range. In addition, of those who were judged to be severely distressed, 62 percent also reported a physical problem.

The task force also reported that women were more likely to be distressed to some degree than were men. Only 33 percent of the homeless men interviewed were judged to be severely distressed as compared to 58.5 percent of the homeless women. Moreover, the number of male homeless that were scored in the positive well-being outnumbered those female homeless by nearly 25 percentage points.

It is also interesting to note that according to the task force report, those staying at a shelter scored lower than those who stayed elsewhere. Only 36 percent of those staying in a shelter were judged to be in the positive well-being range, as compared to 52.6 percent of those who stayed elsewhere.

Twenty-two percent of the homeless reported having been a patient at some time in a mental health facility. Of those nearly a third had been a patient during the past year. Nevertheless, in 1989, 839 homeless mentally ill persons were being treated at Utah's community mental health centers. In addition, 23 percent of the persons surveyed were "judged by the interviewers to be currently exhibiting symptoms of mental illness." Of those, nearly 59 percent scored severely distressed on the DGWB and only 29 percent were judged to be in the positive well-being range.

The recent point-in-time counts also provides further data concerning the homeless mentally ill, but as Martha Burt points out, mentally ill homeless are more likely to be on the streets than housed in shelters.<sup>5</sup> Between 5.9 and 6.8 percent of the sheltered homeless are judged by providers to be chronically mentally ill. It is reasonable to conclude that the chronic mentally ill, for one reason or another, often do not seek shelter. Nationally, according to HUD, 23 percent of the mentally ill are "non-users" of shelters. When this is added to the percent of sheltered homeless judged to be mentally ill in both January and July, the results are similar to both national averages and the 1986 task force report.

Utah County reports that people being discharged from the Utah State Mental Hospital are being given bus tickets and come back to their Basin community and find no one to care for them and no where to live. At this point they are considered homeless and remain transient in the Basin. Usually they are shipped back and forth between counties.

Southeastern Association of Government reports: "There is more opposition to housing projects for the mentally disabled population than there is for low income projects in general. The opposition comes as much from law enforcement and local government as it does from the general public. In this district the shortage of housing for both physically and mentally disabled persons rarely translates into homelessness, at least for the

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<sup>5</sup>Burt, p. 8.

resident. Instead, the disabled person must accept housing that is perhaps less than ideal, remain in the family home until much later in life, or, if available, accept a placement in a group or supportive facility. Given the enormous federal debts, economies of scale undoubtedly preclude the realization of the advocacy goal of moving each disabled person out of family/group environments and into their own individual subsidized housing."

### **C.      DISABLED PERSONS**

The plight of the disabled person in Utah cannot be understated. There are approximately 72,000 disabled persons in the state and most cannot work to provide for themselves. In a study done by the Community Coalition of Utah dramatic indicators identified and characterized the real problems faced by these people:

- (1) 70% are unemployed;
- (2) 73% use wheelchairs at least some of the time;
- (3) The average age of the population is 39 and the disability is present for 15 years;
- (4) The average occupancy in affordable, suitable housing is 7 years;
- (5) Most disabled persons are renters (59%) and ,most of them (75%)would rather own their home;
- (6) 29% live in subsidized units and more would qualify if the assistance were available;
- (7) 70% live in housing which is not totally accessible;
- (8) 97% would rather live independently than live in a care facility. For these reasons the state must require that at least 10% of all assisted housing be fully accessible for the disabled and that those units be 100% occupied by low income disabled persons.